

# Understanding the In-Home Supports Assurance System ISAS

Welcome Supports Planners!

11/18/16



POLICY & COMPLIANCE ADMINISTRATION ISAS DIVISION

Training Agenda
Welcome

- 2. ISAS Overview
- 3. Supports Planner's Role in ISAS
- 4. Understanding ISAS Billing
- 5. Monitoring Participant's Care
- One Time Password Device (OTP)
- 7. Medicaid Eligibility
- Plan of Service
- 9. Emergency Care
- 10. Questions



# ISAS: What is ISAS?

- In-Home Supports
   Assurance System
- A phone-based billing system for in-home Service providers





# ISAS: The ISAS Team

- The ISAS Division at DHMH consists of the people who administer the ISAS system
- We ensure the system runs smoothly, assist providers
  - with the system, and review manually entered shifts
- The ISAS team currently has 13 full-time analysts and is led by Acting Division Chief Jane Holman





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# ISAS: Why Do We Use ISAS?

- Improve quality of Service
- Increase provider accountability
- Decrease fraud and abuse
- Simplify and modernize the billing process
- Allow providers to view their service information online in real-time



# ISAS: Who Uses ISAS?

- All Personal Assistance Providers giving direct Service to Medicaid participants in the following waiver programs:
  - Community First Choice (CFC)
  - Community Options (CO)
  - Community Personal Assistance Services (CPAS)
  - Increased Community Services (ICS)
- Note: ISAS is the <u>only way</u> to bill for Personal Assistance and Shared Attendant services provided through these waiver programs



# ISAS: What Does ISAS Cover?

- In-home services provided by MA enrolled agencies
  - Direct care
    - Both the participant and provider are together at all times
    - Provider is awake and providing a service to assist the participant
- In-home services do no include:
  - Indirect care
    - Errands where the participant is not with the provider
    - Anytime the provider is sleeping



# 1. How Does ISAS Work?

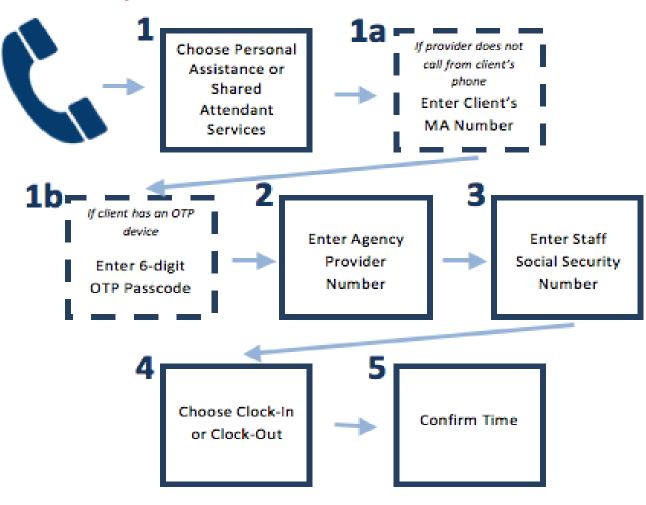
- Providers call our toll-free number
- ISAS verifies
  - Who is providing the service
    - Personal Assistance or Shared Attendant Services
    - Agency provider number
    - Staff member's Social Security Number
  - Who is receiving the service
    - Client's MA Number & OTP Device Code\*

\*more information about OTPs to follow



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# 1a. Call-In System Flow Chart





# 2. How Does ISAS Work?

 Providers must use either participant's phone, or an OTP device, to prove that they are with the participant

#### An OTP device is:

- A small keychain-sized device that generates a 6 digit time stamp every minute of the day
- The OTP device stays with the <u>participant</u> at all times



# 3. How Does ISAS Work?

- The ISAS system checks the phone call against the participant's Plan of Service (POS)
  - The phone number used should match the participant's phone number, else, an OTP device is used
- The ISAS system will not allow providers to be paid for more hours than are listed on the POS



# 4. How does ISAS Work?

- Client eligibility information is compared to MMIS\* records for each service
  - \*MMIS stores all participant and provider eligibility and claims information for the State of Maryland.
- The state issues weekly payments to provider agencies based on the ISAS calls



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# 5. How does ISAS Work?

- Accurate phone numbers are key!
- The participant's home phone and cell phone should be listed on their LTSS profile
- A staff provider's phone number should <u>never</u> be listed on a participant's profile
  - If needed for easy reference, enter a phone number 000-000-0000 and write the provider's contact information into the comments section only



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# Supports Planner's Role in ISAS

- Writing an accurate Plan of Service
- Notifying providers when they are authorized to begin or stop service.
- Serving as a gatekeeper for quality service
  - ensure that providers are giving good service
  - ensure that providers are accurately billing
- Helping the ISAS team resolve participant service concerns



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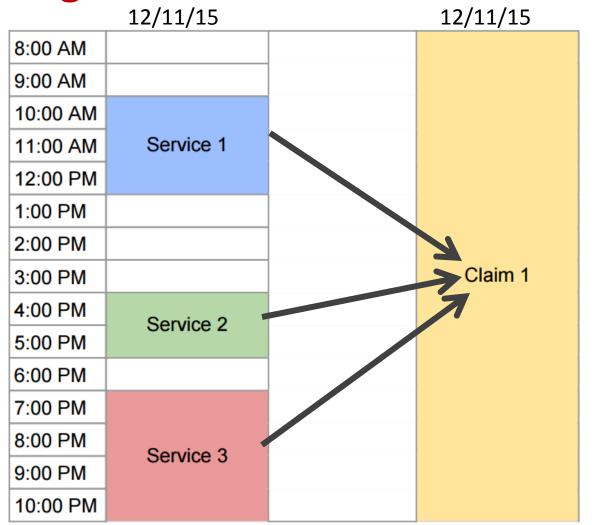
# **ISAS** Billing: Definitions

- Service: One clock-in and One clock-out pair to make a Service
  - i.e. Jane clocked in at 7am, and clocked out at 8am. Her 1 hour shift is called a "service"
- Claim: One or more service(s) that has been bundled together to make a claim. Claims are bundled services with the same:
  - Date of Service
  - Provider Number
  - Client MA Number
  - Service Type (i.e. personal assistance)



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# ISAS Billing: Service vs. Claim



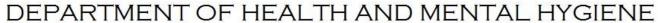




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# ISAS Billing: Definitions

- Missing Time: Adding service information
  - Enter one Missing Time to complete a Service
  - Enter two Missing Times to create an entirely new Service ONLY if no other closed claim exists on that same day
- Adjustment: Adding service time to a CLAIM (services that have already been paid or rejected)



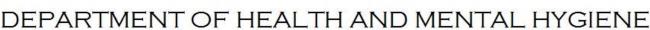


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# **ISAS** Billing: Definitions

# Missing Time/Adjustment Policies

- We only accept up to 4 unexcused missing times/adjustments per staff provider each month (agency staff providers must remember to clock-in and -out over the telephone!)
- Each unexcused MTR/adjustment is given 1 point per missed clock in OR clock out.
- Missing times must be submitted no later than 2 business days after the end of the previous month





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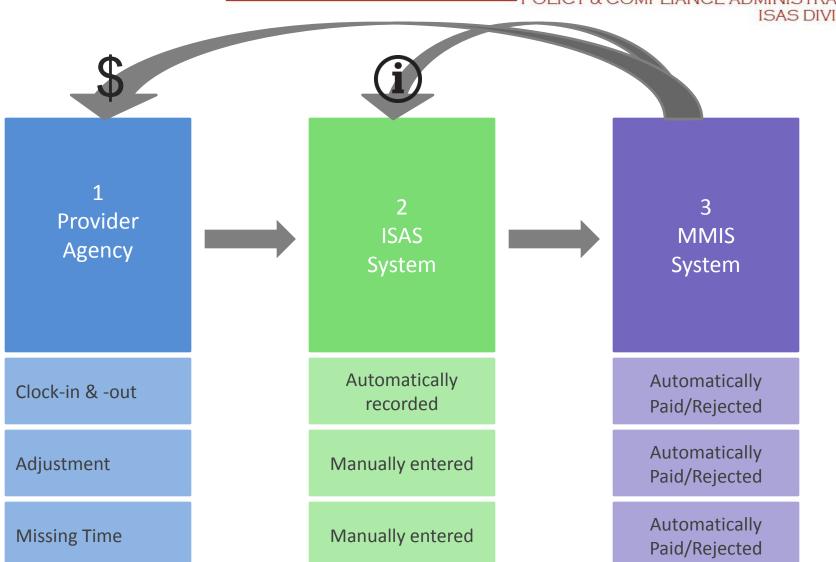
# ISAS Billing: Definitions

# Missing Time/Adjustment Policies

- Starting October 1, 2016 all MTR comments must follow a standard format
- Agency administrators have received detailed training regarding all MTR and adjustment policies
- Details are available in our Policy Guide found on the ISAS homepage



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 One paycheck will include services performed in one Work Week (Thurs-Weds)

One paycheck may also include Adjustments or Missing Time Requests from other work weeks

Month

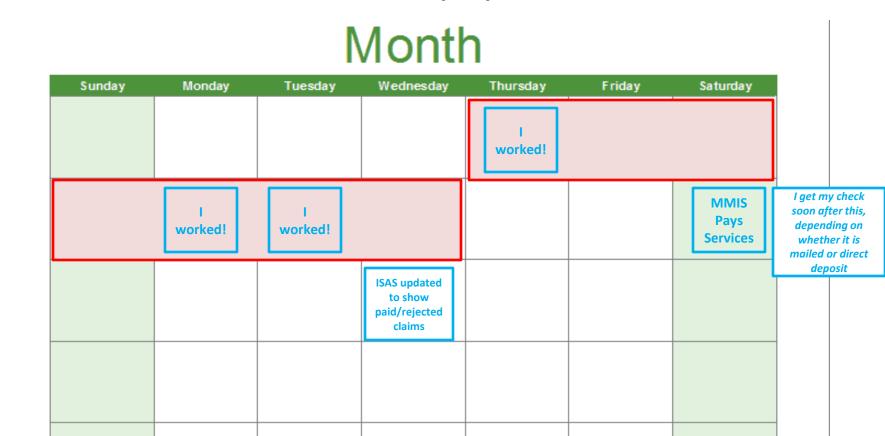
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					(Begin)	WORK	WEEK
Γ				WORK WEEK 2			
L							
				MODELMERKS			
				WORK WEEK 3			



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# ISAS Billing: Claims

What is the timeline for payment of claims?





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# What is the timeline for payment of Missing Times?

	Work Week 1	Work Week 2		Work Week 3	Work Week 4
Thursday	Claim 1				
Friday					
Saturday	Claim 2	MMIS Pays Claim 1 & 2			MMIS pays Work Week 1 Missing Time. It is included in with my payment for Work Week 3
Sunday					1
Monday	Missing Shift				
Tuesday			<b>&gt;</b>	I enter the Missing Time from Work Week 1. DHMH approves it.	
Wednesday					





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# Monitoring Participant's Service

- Use the ISAS website to regularly review your participant's service
  - Check to see if the agency staff provider is clocking in and out at your participant's home
  - Review which staff providers are working for your participant
  - See any unusual behavior or missed shifts



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# Monitoring Participant's Service

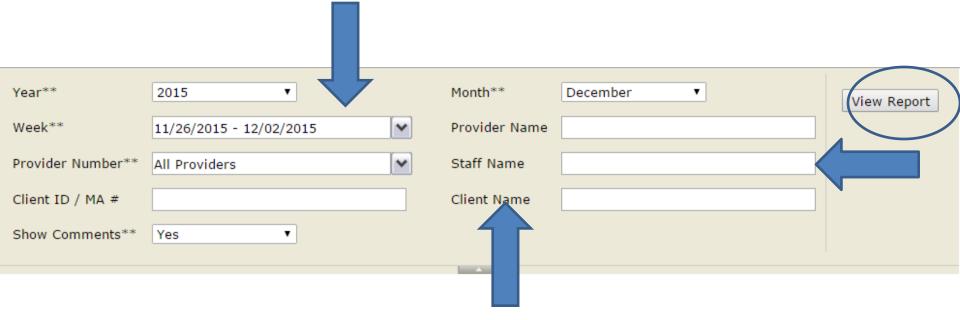
Using the Services Rendered Report Advanced:

- Calculate weekly POS hours
- Monitor services by staff provider or participant
- View clock -in and -out times for staff
- Research patterns in staff behavior
- Review claim status with detail
- Take note of any potential fraudulent billing



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# Monitoring Participant's Service: Services Rendered Advanced





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# Using the LTSS/ISAS Web Application: Services Rendered Advanced

Date Created: 12/7/2015 1:47:46 PM

ISAS - Services Rendered Report Client Summary Level

#### Search Criteria:

Year: 2015

Month: NOVEMBER

Week: 10/29/2015 -11/04/2015,11/05/2015 - 11/11/2015, 11/12/2015 -11/18/2015,11/19/2015 - 11/25/2015, 11/26/2015 - 12/02/2015

Provider Name: ALBERT'S AGENCY

Provider Number: ALBERT'S AGENCY - 123456789, ALBERT'S AGENCY - 123456894, ALBERT'S AGENCY - 123456123

Staff Name:

Client ID/MA#: 99999999999

Client Name:

Comments View: Yes Report Date: 12/7/15

#### **Total Number of Records Returned: 5**

Client MA#	Provider Number	Week	Service Type	Weekly POS Hours	Hours Worked		
99999999999		10/29/2015 - 11/04/2015	Personal Assistance Agency	14.00	<u>14.00</u>		
999999999999999999999999999999999999999		11/05/2015 - 11/11/2015	Personal Assistance Agency	14.00	<u>14.00</u>		
999999999999999999999999999999999999999		11/12/2015 - 11/18/2015	Personal Assistance Agency	14.00	<u>14.00</u>		
999999999999		11/192015 - 11/25/2015	Personal Assistance Agency	14.00	<u>14.00</u>		
999999999999999999999999999999999999999		11/26/2015 - 12/02/2015	Personal Assistance Agency	14.00	<u>21.00</u>		
	99999999999999999999999999999999999999	99999999999	99999999999999999999999999999999999999	99999999999999999999999999999999999999	99999999999999999999999999999999999999		



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# Services Rendered Advanced; Client and Provider Information

Click on the <u>blue text</u> (hyperlinks) for more details. Note: Click the "<u>New Missing Time</u>" hyperlink to submit a missing time request. If you are unable to click the "<u>New Missing Time</u>" link, you must login under the provider number associated with the service to enter

\* Column Amount Paid in ISAS (Gross)\* will be updated every Wednesday

Total Number	r of						
Client Name		Day Of Service	Date of Service	Clock In Time	Clock Out Time	Staff Name	Service Initiation Source
Howard Tenpenny	123456789	Monday	11/30/2015	11/30/2015 12:59 PM	11/30/2015 7:59 PM	FARTHING ONE	Telephone
		Tuesday	12/1/2015	12/1/2015 12:59 PM	12/1/2015 8:05 PM	FARTHING ONE	Telephone
		Wednesda y	12/2/2015	12/2/2015 1:00 PM	12/2/2015 8:01 PM	FARTHING ONE	Telephone



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# Monitoring Participants' Care

- Providers or staff providers may have questions about payment
- Please direct Agency Administrators to speak directly to DHMH ISAS (<a href="mailto:dhmh.isashelp@maryland.gov">dhmh.isashelp@maryland.gov</a>)
- Please direct staff providers to speak to their agency administrator
  - ISAS does not directly employ staff providers. Therefore, all questions about payment *must* be directed to their agency employer



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# One Time Password - OTP

- One Time Password Devices should be used when:
  - The participant does not have a reliable phone
    - Reminder: The staff provider's phone number should <u>never</u> be on the participant's online profile
  - Multiple participants live in the same home

 Supports Planners should only assign OTP devices to participants who absolutely need one. It should never ever be taken away by the staff provider.



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#### One Time Password - OTP

- Time synchronized device
- Keychain sized
- Randomly generates a 6 digit time stamp
- Providers use the number on the OTP device when clocking-in and out on the phone to prove that they are with the participant
  - OTP devices must ALWAYS stay WITH THE PARTICIPANT
  - OTP devices should NEVER be taken by the provider
  - Supports planners should submit a Reportable Event if OTP device is missing or stolen



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#### One Time Password - OTP

#### Step 1

How to assign an OTP device



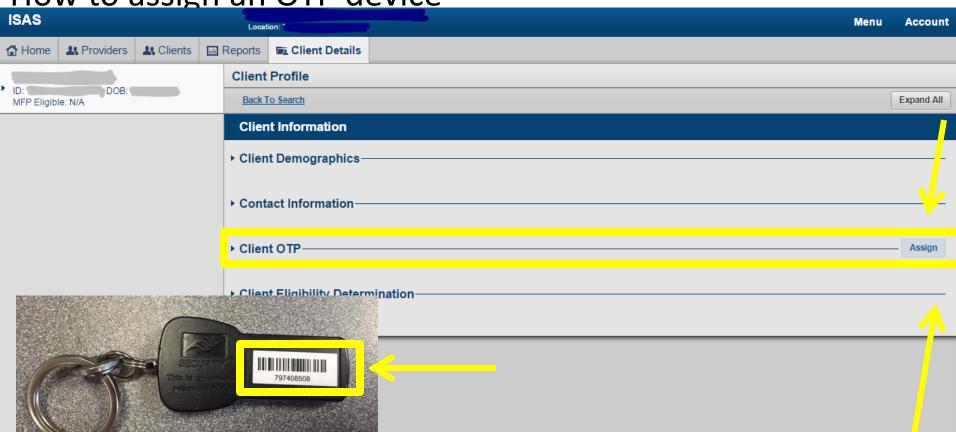


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### One Time Password - OTP

Step 2

How to assign an OTP device





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#### One Time Password - OTP

- Providers and/or participants are expected to report any OTP issues to you, the Supports Planner, immediately
- Supports Planners should check for the OTP during home visits
  - The OTP MUST stay with the participant
  - Submit RE (Reportable Event) if OTP device is missing
- Broken OTP un-assign and send back to DHMH
- OTP devices cost the State money, only assign when needed and retrieve to be reused when no longer needed
- Document information about the OTP in the participant's Activity Notes



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what's the plan?

## Plan of Service

- A participant's Plan of Service (POS) directs how many hours of service a participant may receive
  - A provider's hours, recorded through ISAS, are automatically capped according to the plan of service
  - Example: Patrick is allowed to receive 14 hours of personal assistance per week. His staff provider works 15 hours and records his shifts through ISAS. His staff provider's agency will only be paid for 14 hours.



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what's the plan?

# Plan of Service

- Only enter one service line per provider
  - Do not enter two lines of personal assistance services for the same provider
    - Example: Vanessa has a POS with two lines on it. One line lists Whitney's Caring Heart for 45 hours of service on weekdays. The other line lists Whitney's Caring Heart for 12 hours of service on the weekend. This POS should only have one line with the correct total number of hours per week



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# Plan of Service: Signatures and Effective Date



- The POS is not Active and Approved until DHMH has given it final approval
- Providers sign the POS prior to DHMH review and approval
- Please clearly communicate with providers about when to start services by sending them the <u>Service</u> <u>Notification Form</u>



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# Eligibility: Spans

- Clearly communicate the eligibility start and end dates with the provider and the participant
- Encourage the provider to use Eligibility
   Verification System (EVS) regularly to determine
   if a participant is eligible
  - Dial 1-866-710-1447
     OR visit website www.emdhealthchoice.org.
- If a participant loses eligibility the State will not pay for services



# Eligibility

- A participant loses eligibility:
  - The provider may continue to provide services at their own risk if they believe the participant will regain eligibility back to the date of loss
  - The provider <u>MUST</u> clock-in and -out during the period of ineligibility in order to receive payment if eligibility is restored
  - Time worked during ineligibility that is not recorded through ISAS will <u>not</u> be paid
  - Payment will automatically be issued to the provider when eligibility is restored



# Eligibility: Appeals

- If a participant enters the appeals process:
  - The provider may continue to provide services at the participant's risk for compensation
  - If the participant wins the appeal, all claims recorded through ISAS will be paid by the State
  - If the participant loses the appeal, the participant will be responsible for paying the provider for the services rendered during the appeal process



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## Eligibility: after the 15th of the month

- Participant gains eligibility 1<sup>st</sup>-15<sup>th</sup>
  - Claims pay normally
- Participant gains eligibility 16<sup>th</sup>-31<sup>st</sup>
  - Claims for the 16<sup>th</sup>-31<sup>st</sup> are not processed normally
  - Claims will be manually processed by DHMH for dates between the 16<sup>th</sup>-31<sup>st</sup>, and should process normally starting on the 1<sup>st</sup> of the following month
  - Payment will be delayed 2- 5 weeks





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## **Back-Up Services**

- When the assigned agency provider cannot provide services, so an approved back-up provider gives services:
  - -All back-up providers must be listed on the POS under Emergency Backup
  - Only Medicaid-enrolled personal assistance providers may bill for back-up services, however non-enrolled providers may provide backup services
  - The backup provider must follow the participant's POS and perform all regular duties and tasks.
  - The participant's activity notes must be updated as soon as possible



## Back-Up Services: Payment

- If the back-up provider is also listed as a regular provider on the POS, they will receive payment, however:
  - Claims will be capped at the provider's regular approved hours
  - To be paid for the additional hours they worked in lieu of another regular provider they will need to submit an adjustment to their claims



## **Emergency Services**



- When a participant has an emergency and needs extra hours of Service beyond what is written on the POS:
  - -Less than 7 days in duration
  - -More than 7 days in duration



# Emergency Services: Less than 7 days



- Notify DHMH ISAS Division via email
- Describe the emergency and the number of additional hours in participant's Activity Notes
- Direct the provider to give extra hours of service and to clock – in and –out for their services
  - The provider must use the adjustment process to regain any time that is automatically cut by our system.
     Providers have been made aware of this process but can always use a reminder.
- Submit a Reportable Event (RE) if necessary



# Emergency Services: More than 7 days



- Notify DHMH ISAS Division via email
- Describe the emergency and the number of additional hours in participant's Activity Notes
- Revise the POS to match the participant's emergency needs
  - \*Remember to submit a new POS after the emergency period ends that reduces the hours back to the appropriate level for the participant
- Submit a Reportable Event (RE) if necessary



# Reportable Events (RE)

- File a RE any time you discover or suspect fraudulent billing through ISAS
- Please be as detailed as possible in all REs
  - Include approximate hospital admission/release times if possible
- File a RE and contact DHMH ISAS if you notice a provider billing while the participant is hospitalized
- File a RE and contact DHMH ISAS if you discover that a provider billed for a time when they were not physically working with the participant



# Supports Planners: Partners w/ ISAS

- We're here to help
- Contact us anytime 410-767-1719

## dhmh.isashelp@maryland.gov

- Open communication is key
- Quality Service for participants is most important



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# Questions

